



# clinical consultation



Sedgwick's 24/7 clinical consultation/nurse triage solution ensures injured employees receive the right care quickly. Our innovative program is designed to help them recover and return to work safely.

Early and appropriate delivery of healthcare to injured employees is a critical element in effectively managing lost workdays and medical costs associated with workers' compensation claims. Our experience in creating custom solutions to improve client outcomes includes a time of injury assessment by a medical professional through our fully integrated, clinical consultation/nurse triage service. This model was developed to assist employers in determining the appropriate medical care when an occupational injury occurs.

Injured employees who need treatment are referred to the highest quality network provider or client-preferred provider. Critical information is shared with the claims team to reduce medical costs, improve return-to-work outcomes and ensure a positive employee experience.

## Getting the right care from the start

With our integrated service and customized options, our clinical team can:

- Accurately recommend the appropriate medical care for the employee via referral to in-person care, telemedicine or self-care
- Advise the employee of employer-selected ancillary services if medical care is needed

Our services are delivered by Sedgwick's team of registered nurses who are familiar with occupational injuries. They are available 365 days a year, 24 hours a day to assist injured employees and provide coverage for all time zones.

## Designed for efficiency and quality

Clients can create a tailored solution to complete claim reporting and care recommendations. Options include a customized toll-free number, greeting and script, as well as email intake, electronic intake with transfer to nurse triage or phone intake/first report of injury (FROI)/nurse triage in a single call. A state-specific FROI is sent electronically to the claims team as a part of the reporting process.

## Expert triage tools

One of our registered nurses will assess the employee and provide care recommendations using the Schmitt-Thompson adult after-hour guidelines, known as best-in-class in the industry for triaging medical conditions. These evidence-based guidelines provide safe, effective triage that directs injured employees to the most appropriate level of care. There are over 300 robust guidelines with content that is reviewed and updated annually with input from a panel including call center medical directors, emergency physicians, nursing practice consultants and physician specialists.



## Evaluation

The nurse will screen the caller for triage eligibility based on best practices and client preferences, and evaluate the symptoms against the evidence-based clinical guidelines. Questions are posed in a logical sequence based on the individual case and each one is linked to specific healthcare advice. The guidelines will direct the nurse to the appropriate care recommendations for the injured employee.

Sedgwick reviewed client programs that moved from a triage company using home-grown guidelines to triage services using proven Schmitt-Thompson guidelines for self-care or treatment recommendations. Our analysis showed that 10% to 15% of the cases receiving self-care recommendations that ultimately became a claim had 20% to 50% higher average temporary total disability days. Inaccurate front-end self-care recommendations cost the employer and the employee down the road.

## Referrals and post-triage questioning

Care recommendations for the injured employee may be first aid/self-care, telemedicine or provider referral. If provider care is recommended, the nurse selects a physician based on the employee's location, the client's PPO affiliation or preferences, and initial treatment facilities. The nurse will call the clinic while the employee is on the phone to coordinate care and provide appropriate paperwork to facilitate treatment.

Use of this approach on select cases allows us to avoid unnecessary urgent care visits and ensures that the employee receives clear clinical direction from the onset of their injury or symptoms.

At the completion of the call, the nurse will send the following paperwork to the injured employee, client-designated contacts and/or provider based on care recommendations:

- Self-care
  - Clinical consultation nurse report, care advice and clinical team contact information
- Telemedicine and provider care
  - Clinical consultation nurse report, care advice, provider and clinical team contact information
  - Provider referral form with information on billing, ancillary service contacts, utilization review contact and the client's return-to-work program
  - Return-to-work physician form
  - Pharmacy First Fill form
  - Client forms (optional)

## Disposition

The disposition of care includes emergency services (911), emergency room care, physician care within four hours (minor medical/urgent care), physician care within 24 hours, physician care within three days, telemedicine, and first aid or self-care.



## Physician referral

- Nurse locates available network clinic/provider near employee's location; selection is based on injury type, location, hours and network affiliation
- Nurse will fax/email employee and clinic/physician a list of appropriate ancillary service providers, utilization review protocols and notice of the client's return-to-work program
- 24-hour to 48-hour follow-up call via interactive voice response survey will assess compliance with care recommendations, and assess nurse and provider care experience
- Nurse triage report is sent to the claims system with call details and recommendations

## Telemedicine

Our telemedicine services are fully integrated with our clinical consultation solution and include:

- Guidance to telemedicine through careful triage of the employee's treatment needs and technology access
- On-screen care provided by a network physician who specializes in occupational medicine and is trained for the telemedicine experience
- Immediate treatment with all appropriate care facilitated with a stay-at-work focus

## First aid/self-care

Our nurses provide first aid and self-care recommendations per physician protocols. Use of this approach on select cases allows us to avoid

unnecessary provider visits and ensures that the employee receives clear clinical direction at the time of injury. The clinical team will also:

- Provide the employee with a nurse triage call back number and instructions if the condition worsens
- Confirm that the employee may continue to work
- Send a nurse triage report to the claims system with call details and recommendations

Employees will receive 24-hour to 48-hour follow-up calls via interactive voice response. The calls include survey questions that will:

- Assess the employee's compliance with care recommendations
- Provide the option to speak with a nurse for worsening symptoms or follow-up questions
- Assess their nurse care experience

## Post-acute referral process

The clinical consultation nurse report data is transmitted and stored in Sedgwick's proprietary claims management system. These notes are available for the claims examiner and/or clinical resource assigned to the claim on an ongoing basis, providing up-to-date information on the recommendations for initial care and the provider contact information. Calls are recorded and available for examiner review for 90 days in the event of any discrepancy with the information gathered during the subsequent claim investigation.



## Implementation and training

Our dedicated implementation managers work with our client partners to ensure a smooth transition. The implementation includes custom protocols for integrating this service into new and existing claim programs, and an efficient system training program with wall cards for worksite managers.

## Results

Our clients receive several benefits when comparing the results to claims without clinical consultation/nurse triage. Some of the key results include:

- 24% lower average incurred
- 96% employee satisfaction rate
- 40% fewer claims initially treated at ER compared to those without clinical consultation
- 85% of claims going through clinical consultation treat with 4 or 5 star network providers compared to 78% for non-clinical consultation claims
- 20% fewer claims with lost time
- 37% fewer claims with litigation
- 25% lower medical incurred
- 35% lower total incurred from claims using telemedicine compared to other clinical consultation claims
- 23% of the cases are resolved with self-care; the clinical team provides recommendations for injuries that can be treated with first aid
- 3% of claims referred to telemedicine
- Improved use of ancillary service networks

## Reporting

Employers will receive monthly, quarterly and annual reports that include utilization statistics along with the results of each call, individually and summarized by outcome and cost savings. These reports not only demonstrate the impact of the program, but also help identify areas where improvement and compliance is needed.

Our team provides the following clinical consultation reports and program information for clients:

- Summary report – monthly
- Detail report – monthly
- Dashboard – quarterly
- Stewardship – annually

**Contact Sedgwick today to learn more about our clinical consultation solution.**

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